



**ACKNOWLEDGEMENT OF NOTIFICATION
OF
HAZARDOUS WASTE ACTIVITY**

06/28/2002

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER	NYR000107318
INSTALLATION NAME	NYCT
INSTALLATION ADDRESS	100 W 147TH ST INTERS LENOX AVE & 147TH ST NEW YORK, NY 10039
MAILING ADDRESS	370 JAY ST ROOM 819 BROOKLYN, NY 11201

EPA Form 8700-12AB (4-89)


**USEPA - REGION 2
RCRA Programs Branch
290 Broadway, 22nd Floor
New York, NY 10007-1866**

**ATTN: JACK HOYT
Tel : (212) 637-4106
Fax: (212) 637-4949**

**TO: NYCT
or Current Occupant
ATTN: SHERRY BULKLEY - SYS SFTY SPEC
370 JAY ST ROOM 819
BROOKLYN, NY 11201**

To minimize delays, please complete all items.

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

<p>Please refer to the instructions for filling out this form. The information requested here is required by law (Section 9010 of the Resource Conservation and Recovery Act).</p>		 EPA		Notification of Regulated Waste Activity		<p>United States Environmental Protection Agency</p>	
						<p>Form 350-020-020 Date Received 2002 JUN 20 PM 1:08 RCRA PROGRAMS BR-AMOU</p>	
I. Installation's EPA ID Number (Mark X in the appropriate box)							
<input checked="" type="checkbox"/> A. First Notification		<input type="checkbox"/> B. Subsequent Notification (Complete item G)		C. Installation's EPA ID Number NYR0000107318			
II. Name of Installation (Include company and specific site name)							
NEW YORK CITY TRANSIT							
III. Location of Installation (Physical address, not P.O. Box or Route Number)							
Street Requires building number, or Lot and block number or the distance and direction from the nearest cross street							
100 WEST 147TH ST							
Street (continued) Intersection LENOX AVE + 147TH ST							
City or Town NEW YORK				State NY		ZIP Code 10039-	
County Code		County Name					
IV. Installation Mailing Address (See instructions)							
Street or P.O. Box 370 JAY STREET, ROOM 819							
City or Town BROOKLYN				State NY		ZIP Code 11201-	
V. Installation Contact (Person to be contacted regarding waste activities or effs)							
Name (last) BULKLEY				Name (first) SHERRY			
Job title SYS SFTY SPEC				Phone Number (area code and number) 718-243-4581			
VI. Installation Contact Address (See instructions)							
A. Contact Address Location		B. Street or P.O. Box					
<input type="checkbox"/> Location <input checked="" type="checkbox"/> Mailing		370 JAY STREET, ROOM 819					
City or Town BROOKLYN				State NY		ZIP Code 11201-	
VII. Ownership (See instructions)							
A. Name of Installation's Legal Owner (LAND OWNER) NEW YORK CITY TRANSIT							
Street, P.O. Box, or Route Number 370 JAY STREET, ROOM 819							
City or Town BROOKLYN				State NY		ZIP Code 11201-	
Phone Number (area code and number) 718-243-4581				B. Land Type		C. Owner Type	
						D. Change of Owner Indicator	
						Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
						(Date Changed) Month Day Year	

Please reply to: Jack Hoyt, DEPP, US EPA 290 Broadway, 22FL. NYC, NY 10007-1866. Tele: (212) 637-4106.

Mailing Address Verified

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